



**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	
First Named Inventor	RICHARD COSTELLO
COMPLETE IF KNOWN	
Application Number	10/644,940
Filing Date	08/21/2003
Art Unit	
Examiner Name	

I hereby declare that:
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ONE PIECE COLLAPSIBLE DISPOSABLE BOWL-LIKE CONTAINER

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **08/21/2003** as United States Application Number or PCT International

Application Number **10/644,940** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? es No
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input style="width: 100px;" type="text"/>				OR <input checked="" type="checkbox"/> Correspondence address below	
Name BRIAN FAGLIANA					
Address 2934 GRISDALE RD					
City ROSLYN		State PA		ZIP 19001	
Country USA		Telephone 215 657 4653		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) RICHARD			Family Name or Surname COSTELLO		
Inventor's Signature <i>Rich Costello</i>					Date 01/09/04
Residence: City ELKINS PARK		State PA		Country USA	
				Citizenship YES	
Mailing Address 7855 MILL RD					
City ELKINS PARK		State PA		ZIP 19027	
				Country USA	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) BRIAN RICHARD			Family Name or Surname FAGLIANA		
Inventor's Signature <i>Brian R. Fagliana</i>					Date 1/4/04
Residence: City ROSLYN		State PA		Country USA	
				Citizenship YES	
Mailing Address 2934 GRISDALE RD					
City ROSLYN		State PA		ZIP 19001	
				Country USA	
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					